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Bib Data Sheet

CONFIRMATION NO. 1151

| SERIAL NUMBER | FILING OR 371(c)<br>DATE | CLASS | GROUP ART UNIT | ATTORNEY<br>DOCKET NO. |
|---------------|--------------------------|-------|----------------|------------------------|
| 09/992,612    | 11/13/2001<br>RULE       | 606   | 3731           | 337562000901           |

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

*OK AL in DE*  
This application is a CON of 09/774,913 01/30/2001 PAT R,E37,665  
which is a REI of 09/002,535 01/02/1998 PAT 5,882,350  
which is a CIP of 08/843,972 04/17/1997 PAT 5,888,204  
which is a CIP of 08/632,560 04/15/1996 PAT 5,725,588  
which is a CIP of 08/421,087 04/13/1995 PAT 5,520,690  
and said 09/002,535 01/02/1998  
is a CON of 08/835,909 04/10/1997 ABN  
which is a CIP of 08/663,383 06/13/1996 PAT 5,669,911  
which is a CIP of 08/421,087 04/13/1995 PAT 5,520,690  
and is a CIP of 08/559,196 11/13/1995 ABN  
which is a CIP of 08/421,087 04/13/1995 PAT 5,520,690

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/27/2002

|   |   |                        |                       |                            |
|---|---|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY<br>NJ               | SHEETS<br>DRAWING<br>9 | TOTAL<br>CLAIMS<br>12 | INDEPENDENT<br>CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |   |                        |                       |                            |
| Verified and<br>Acknowledged  | Examiner's Signature<br><i>AL in DE</i> | Initials               |                       |                            |

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## TITLE

POLYAXIAL PEDICLE SCREW HAVING A THREADED AND TAPERED COMPRESSION LOCKING  
MECHANISM

FILING FEE  
RECEIVED  
496

FEES: Authority has been given in Paper  
No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
No. \_\_\_\_\_ for following:

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| <input type="checkbox"/> All Fees                                 |
| <input type="checkbox"/> 1.16 Fees ( Filing )                     |
| <input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time ) |